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P.O.Box 7882 Madison, WI 53707-7882	P.O.Box 7882 Madison, WI 53707-7882

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State Capitol - B35 South
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Senate Sergeant-At-Arms

State Capitol - B35 South

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

Due to the difficulty of getting all of the members together in one place, the Senate Committee on Judiciary and Consumer Affairs is unable to hold an Executive Session on Senate Bill 172 as planned. We would like to conduct a paper ballot on the bill. Please return your ballot to Sen. George's office (Room 118 South) by noon Monday March 6, 2000.

Introduction and Adoption of Substitute Amendment (LRB s0342/2): (Optional -- Please check if you wish to Move Moved Introduction and Adoption of the Substitute Amendment) (Optional -- Please check if you wish to Second Seconded Introduction and Adoption of the Substitute Amendment) (In Fayor of Adoption of the Substitute Aye Amendment) (Oppose Adoption of the Substitute Amendment) No Passage of Senate Bill 172 As Amended: (Optional -- Please check if you wish to Move Moved Passage of the Bill as Amended) (Optional -- Please check if you wish to Second Seconded Passage of the Bill as Amended) (In Favor of Passage of the Bill as Amended) Aye (Oppose Passage of the Bill as Amended) No March 6, 2000 Signed: Please return to Sen. George's Office by noon Monday, March 6, 2000.

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	Moved	(Optional Please check if you wish to Move Introduction and Adoption of the Substitute Amendment)
	Seconded	(Optional Please check if you wish to Second Introduction and Adoption of the Substitute Amendment)
	Aye	(In Favor of Adoption of the Substitute Amendment)
	No	(Oppose Adoption of the Substitute Amendment)
Passage of Sena	ate Bill 172 As Am	ended:
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	Aye	(In Favor of Passage of the Bill as Amended)
	No	(Oppose Passage of the Bill as Amended)
Signed:	ne s Riss	March 6, 2000
Please return to	Sen George's Office	ce by noon Monday, March 6, 2000

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	Aye	(In Favor of Adoption of the Substitute Amendment)
	No	(Oppose Adoption of the Substitute Amendment)
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		(In Favor of Passage of the Bill as Amended)
	No	(Oppose Passage of the Bill as Amended)
Signed	i: Albert Dar	March 6, 2000

Please return to Sen. George's Office by noon Monday, March 6, 2000.

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Introduction and Adopti	on of Substitute Am	endment (LRB s0342/2):
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	Seconded	(Optional Please check if you wish to Second Introduction and Adoption of the Substitute Amendment)
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	Seconded	(Optional Please check if you wish to Second Passage of the Bill as Amended)
	Aye	(In Favor of Passage of the Bill as Amended)
	No	(Oppose Passage of the Bill as Amended)
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Signed:	Chrie Clau	March 6, 2000

Please return to Sen. George's Office by noon Monday, March 6, 2000.

State of Wisconsin



GARY R. GEORGE SENATOR

TO:

Staff to Members, Senate Committee on Judiciary and Consumer Affairs

FROM:

Dan Rossmiller, Clerk

Senate Committee on Judiciary and Consumer Affairs

RE:

Proposed Amendments to Bills That Have Previously Received a Public Hearing in the Senate Committee on Judiciary and Consumer Affairs and May Receive

Executive Action Next Week

DATE:

February 25, 2000

Attached please find a list of the of proposed amendments and proposed substitute amendments to bills that have previously received a public hearing that I would like to discuss with you on February 28, 2000.

State of Wisconsin



GARY R. GEORGE SENATOR

TO:

Members, Senate Committee on Judiciary and Consumer Affairs

FROM:

Dan Rossmiller, Clerk

Senate Committee on Judiciary and Consumer Affairs

RE:

Paper Ballot on Senate Bill 172 (a/k/a "Health Care Whistleblower" bill)

DATE:

March 3, 2000

Attached please find a paper ballot and a proposed Substitute Amendment to SB 172, which received a public hearing in the Senate Committee on Judiciary and Consumer Affairs on January 25, 2000.

The Substitute Amendment reflects an agreed-upon compromise among representatives of the groups affected by this legislation. A copy of the Substitute Amendment and a Legislative Council memorandum describing the provisions of the Substitute Amendment is attached.

Thank you for your assistance and cooperation.

Note: Please return the paper ballots by noon Monday March 6, 2000.

Rossmiller, Dan

From:

Burnett, Douglas

Sent:

Saturday, March 04, 2000 3:00 PM

To:

Rossmiller, Dan

Subject:

RE: Tentative Seante Schedule

Understood. And thanks on SB 172.

----Original Message----From:

Rossmiller, Dan

Sent:

Saturday, March 04, 2000 2:57 PM

To:

Burnett, Douglas

Subject:

Tentative Seante Schedule

Doug:

I noticed that AB 614 was not on the tentative list. Sen. George really wants to pass this bill. I don't foresee any amendments so if it passes on the 14th that would be o.k.

I will keep you posted on the progress of our paper exec on SB 172 -- the Health Care Whistleblower bill. I have asked that the paper ballots be returned by noon.

Dan



WISCONSIN LEGISLATIVE COUNCIL STAFF MEMORANDUM

One East Main Street, Suite 401; P.O. Box 2536; Madison, WI 53701-2536 Telephone: (608) 266-1304 Fax: (608) 266-3830

Email: leg.council@legis.state.wi.us

DATE:

March 3, 2000

TO:

INTERESTED LEGISLATORS

FROM:

Richard Sweet, Senior Staff Attorney

SUBJECT:

Senate Substitute Amendment __ (LRBs0342/2) to 1999 Senate Bill 172

(Health Care Whistleblower)

This memorandum summarizes Senate Substitute Amendment __ (LRBs0342/2) to 1999 Senate Bill 172, relating to disciplinary action against an employe of a health care facility or a health care provider who reports a violation of the law or a violation of a clinical or ethical standard by the health care facility or health care provider or by an employe of a health care facility or health care provider and providing a penalty. The bill has generally been referred to as the "health care whistleblower bill."

Under the bill, an employe of a health care facility or health care provider may report certain information to specified persons or entities and may not be subjected to certain disciplinary actions by the employer. The substitute amendment makes the following changes to the bill:

- 1. The substitute amendment modifies the *list of persons and entities to whom a whistleblower may report* and not be subjected to retaliation. Under Senate Bill 172, the person may report to any appropriate law enforcement agency, district attorney, U.S. attorney, state agency, the employe's collective bargaining representative, any professionally recognized accrediting or standard-setting body, or any officer, director or other employe of the facility or provider. Under the substitute amendment, the employe may report to: (a) a state agency; (b) any professionally recognized accrediting or standard-setting body that has accredited, certified or otherwise approved the facility or provider; (c) any officer or director of the facility or provider; or (d) any employe of the facility or provider who is in a supervisory capacity or in a position to take corrective action.
- 2. The substitute amendment adds a requirement that an agency or accrediting or standard-setting body that receives a report under the new law must, within five days after receiving the report, notify the facility or provider that is the subject of the report, in writing, that a report alleging certain violations has been received and must provide the facility or provider with a written summary of the contents of the report, unless the agency or accrediting

or standard-setting body determines that providing this notification would jeopardize an ongoing investigation of a violation alleged in the report. The notification and summary may not disclose the identity of the person who made the report.

- 3. Senate Bill 172 states that no facility or provider may "discharge or otherwise retaliate or discriminate against, or threaten to discharge or otherwise retaliate or discriminate against" any person because of a whistleblower action protected by the bill. The substitute amendment changes the language to provide that no facility or provider may "take disciplinary action against, or threaten to take disciplinary action against," such a person. The term "disciplinary action" is defined in current s. 230.80 (2), Stats., and cross-referenced in the substitute amendment, as follows:
 - 230.80 (2) "Disciplinary action" means any action taken with respect to an employe which has the effect, in whole or in part, of a penalty, including but not limited to any of the following:
 - (a) Dismissal, demotion, transfer, removal of any duty assigned to the employe's position, refusal to restore, suspension, reprimand, verbal or physical harassment or reduction in base pay.
 - (b) Denial of education or training, if the education or training may reasonably be expected to lead to an appointment, promotion, performance evaluation or other personnel action.
 - (c) Reassignment.
 - (d) Failure to increase base pay, except with respect to the determination of a discretionary performance award.
- 4. Senate Bill 172 prohibits retaliation against a person because the person took certain actions or because the facility or provider believes that the person took those actions or may take those actions. The substitute amendment deletes the provisions about the facility or provider believing that the person *may* take the specified actions.
- 5. Senate Bill 172 protects a whistleblower who takes certain actions in good faith. The substitute amendment states that an employe is *not acting in good faith* if the employe reports information that he or she knows or should know is false or misleading, or takes other specified actions based on information that the employe knows or should have known is false or misleading.
- 6. The substitute amendment adds a requirement that each facility and provider must post, in one or more conspicuous places where notices to employes are customarily posted, a notice in a form approved by the Department of Health and Family Services setting forth employes' rights under the whistleblower law. A facility or provider that violates the posting requirement is required to forfeit not more than \$100 for each offense.

Feel free to contact me if I can be of further assistance.

Assembly Bill 45

Relating to: a hotline in the department of justice for the reporting of information regarding dangerous weapons in public schools.

By Representatives Kelso, Colon, Gunderson, Hahn, Hutchison, Jensen, Kedzie, Lassa, F. Lasee, Ladwig, M. Lehman, Musser, Owens, Ryba, Seratti, Spillner, Sinicki, Suder, Sykora, Urban, Vrakas, Powers and Huebsch; cosponsored by Senators Darling, Risser and Roessler.

Risse?

Agreed Upon Amendment Pending: At the request of DOJ an amendment (LRBa1436/1) was prepared to expand the scope of things reportable through this hotline to include threats to damage school premises or harm persons on school grounds. Rep. Kelso, the author of the bill has signed off on the amendment.

Assembly Bill 111

Relating to: committing theft against certain persons and providing a penalty.

By Representatives Suder, Albers, Ainsworth, Freese, Handrick, Hoven, Huebsch, Kelso, Ladwig, F. Lasee, Montgomery, Musser, Nass, Olsen, Plale, Powers, Turner and Vrakas; cosponsored by Senators Darling, Fitzgerald, Lazich, Roessler, Welch and Zien.

Substitute Amendment Pending: At the request of DOJ and its Elder Law Advocate a substitute amendment (LRBs0307/1) was prepared to broaden the bill to address all forms of financial crimes against the elderly. The substitute amendment:

1. Covers all financial crimes

- (e.g., attempted theft, theft, misappropriation of personal identifying information or documents, forgery, fraudulent writings, fraudulent destruction of certain writings.)
- 2. Protects all elderly people, regardless of capacity, place of residence or participation in programs.
- 3. Makes definition of "vulnerable adult" identical to the definition of that term used elsewhere in the statutes (e.g., Chapters 55, 813 and 940).
- 4. Includes all Powers of Attorney, whether durable or non-durable.

Rep. Suder, the author of the bill, expresses no objection to the substance of the changes.

Assembly Bill 318

Relating to: the controlled substance methamphetamine and providing penalties.

By Representatives Kreibich, Rhoades, Brandemuehl, Urban, Suder, Klusman, Freese, Ladwig, Ainsworth, Nass, Musser, Seratti, M. Lehman, Stone, Albers, Pettis, Gunderson, Kelso, Skindrud, Kedzie, Olsen, Huebsch, Petrowski, Gronemus, Vrakas, Kestell, Montgomery and Ward; cosponsored by Senators Clausing, Moen, Zien, Panzer, Roessler, Darling, Huelsman, Schultz, Rude and Farrow.

No Amendments Pending.

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Assembly Bill 391

Relating to: disposable earning exempt from garnishment.

By Representatives Gunderson, Musser, Townsend, Turner, Sykora, Hahn. Petrowski, Hundertmark, Spillner, Gronemus, Kelso, Albers and Powers; cosponsored by Senator Darling.

No Amendments Pending.

Assembly Bill 533

Relating to: authorizing the appointment of assistant district attorneys to provide ative justice services: authorizing counties and the restorative justice services; authorizing counties and the department of corrections to contract with religious organizations for the provision of services relating to delinquency and crime prevention and the rehabilitation of offenders; inmate rehabilitation; creating the office of government-sectarian facilitation; establishing a grant program for a neighborhood organization incubator; distributing funding for alcohol and other drug abuse services; and making appropriations.

Joint Legislative Council.

No Amendments Pending. Concern About Church-State Separation Issues. Bill contains appropriation. Must go the Joint Finance.

Assembly Bill 562

Relating to: creating a southeast Wisconsin crime abatement task force. By the Committee on Criminal Justice.

Kron O.K

Two Amendments Pending: One amendment (LRBa1434/1), at the request of Reps. Krug and Riley adds the Chief of Police of the City of Millwaukee as a member of the task force. The other amendment (LRBa1427/1) at the request of the State Bar of Wisconsin adds to the task force a member of the State Bar's Criminal Law Section who lives in the affected area, as well as a member of a local bar association for every county enumerated as part of the task force in the bill (i.e., Milwaukee, Kenosha, Racine, Rock and Waukesha).

Assembly Bill 614

Relating to: unauthorized duplication of a recording, unauthorized recording of a performance, failure to disclose manufacturer of a recording, unauthorized use of a recording device in a movie theater and providing a penalty.

By Representatives Pettis, Kestell, Jensen, Coggs, Underheim, Klusman, Sykora, Albers, Olsen, Nass, Ward, Handrick, Vrakas, Staskunas, Kreibich, Walker, Musser, Kaufert and Bock; cosponsored by Senators George, Rosenzweig, Panzer, Breske and Grobschmidt.

No Amendments Pending.

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Senate Bill 106

Relating to: court-appointed special advocates for children and juveniles in need of protection or services.

By Senators Wirch, Plache, Huelsman, Burke, Darling, Clausing, Rosenzweig, Erpenbach and Roessler; cosponsored by Representatives Steinbrink, Kreuser, Porter, Ladwig, Kelso, Turner, Coggs, Brandemuehl, Sykora, Reynolds, Meyer, La Fave, Johnsrud and Ryba.

Agreed Upon Substitute Amendment Pending. (LRBs0270/4). Sen. Wirch's office has worked out a compromise with all the concerned groups, including organizations that currently operate CASA programs.

Senate Bill 110

Relating to: prisoners throwing or expelling certain bodily substances at or toward others, testing for the presence of communicable diseases in certain criminal defendants and juveniles alleged to be delinquent or in need of protection or services and providing a penalty.

By Senators Moen, Drzewiecki, Breske, Farrow, Erpenbach, Rude, Baumgart, Huelsman, Schultz and Roessler; cosponsored by Representatives Musser, Huebsch, Plale, Pettis, Seratti, Ryba, Sykora, Gronemus, Ziegelbauer, Ainsworth, Ladwig, F. Lasee and Albers, by request of the Local 219, Jackson Correctional Institution Officers.

Two amendments pending. The first one (LRB a1180/1) by request of the State Laboratory or Hygiene expands the scope of bodily substances covered under the bill. The second one (LRBa1298/1) by request of the committee members, reduces the maximum penalty from five years, consecutive to the current prison term, to 2 years, consecutive to the current prison term.

Senate Bill 172

Relating to: discharge or other retaliation or discrimination against an employe of a health care facility or a health care provider who reports a violation of the law or a violation of a clinical or ethical standard by the health care facility or health care provider or by an employe of the health care facility or health care provider and providing a penalty.

By Senators George, Robson, Baumgart, Burke, Cowles, Darling, Grobschmidt, Moen, Plache, Roessler and Rosenzweig; cosponsored by Representatives Underheim, Carpenter, Albers, Black, Bock, Boyle, Coggs, Colon, Cullen, Goetsch, Hahn, Hebl, Kelso, Kreuser, Krusick, La Fave, Ladwig, Lassa, J. Lehman, M. Lehman, Miller, Musser, Olsen, Pettis, Plouff, Pocan, Richards, Sinicki, Staskunas, Walker, Wasserman, Waukau and Ziegelbauer.

Agreed Upon Substitute Amendment Pending. (LRBs???/?). Senators Robson and Clausing and Representative Underheim convened a meeting with representatives of hospitals and health care worker unions to work out a compromise that all parties have apparently accepted. The compromise is being drafted as a substitute amendment to both the Assembly and Senate versions of the bill.

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Senate Bill 214

Relating to: notice to a victim of the right to make a statement at sentencing or disposition.

By Senator Burke; cosponsored by Representative Huber.

No Amendments Pending.

Senate Bill 284

Relating to: contracts with persons who take depositions.

By Senators George, Rude, Breske, Cowles and Rosenzweig; cosponsored by Representatives Walker, Huebsch, Hebl, Staskunas, M. Lehman, Albers, Goetsch, J. Lehman, Hahn, Colon, Richards and Cullen.

No Amendments Pending. This bill was voted upon at the February 1, 2000 executive session but was not reported out of committee.

Senate Bill 395

Relating to: policies concerning treatment and conduct of persons detained during a sexually violent person commitment proceeding and person committed for treatment after being found to be a sexually violent person.

By Senator George; cosponsored by Representative Huebsch. By Request of the Department of Health and Family Services.

Agreed Upon Substitute Amendment Pending: (LRB s0315/1) As substantiated by testimony at the 2-22-2000 hearing, the substitute addresses the concerns of both DHFS and DOJ.

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THE PROTECTION AND ADVOCACY SYSTEM FOR PEOPLE WITH DISABILITIES

January 28, 2000

Sen. Gary George P.O. Box 7882 Madison, WI 53707

Re:

SB 172

Dear Sen. George:

Unfortunately, scheduling conflicts prevented my attendance at the January 25th Senate Judiciary and Consumer Affairs hearing on SB 172. I spoke with your chief of staff this afternoon, who informed me that a vote was not taken on the bill that day. He also informed me that your office would be willing to distribute the enclosed testimony regarding that bill to the committee members.

Thank you for your anticipated cooperation in distributing the enclosed testimony. Please do not hesitate to contact me if you have any questions about our position on this bill.

Sincerely,

Jeffrey Spitzer-Resnick

Managing Attorney



THE PROTECTION AND ADVOCACY SYSTEM FOR PEOPLE WITH DISABILITIES

TESTIMONY TO THE SENATE JUDICIARY AND CONSUMER AFFAIRS COMMITTEE REGARDING SB 172

by Jeffrey Spitzer-Resnick Managing Attorney

Due to scheduling conflicts, I was unable to attend the recent Senate Judiciary and Consumer Affairs Committee hearing regarding SB 172. However, since the committee has not taken a vote on the bill, I am submitting this testimony on behalf of the Wisconsin Coalition for Advocacy (WCA). As many of you may know, WCA is the state's designated protection and advocacy agency for people with disabilities. In that role, we regularly receive complaints regarding inadequate care and treatment received by patients at health care facilities, and from health care providers, throughout the state. The complaints frequently come from employees of health care facilities and providers, who urge us to keep their names confidential for fear of retaliation from their employer. While we respect the complainants' request for confidentiality, that request hinders our ability to advocate for appropriate changes in the facility's or provider's practices, as those facilities and providers tend to resist our suggestions without proof of wrongdoing, which becomes difficult without revealing our sources.

Of course, the individuals most harmed by health care employees who refrain from whistle blowing on their employers are patients, who may not even know that they are receiving inadequate care, or may find out after serious damage has been done. This bill, then, would go a long way to protect not only health care employees, but patients as well. Accordingly, we think passage of SB 172, is long overdue, and we urge this committee to pass it soon, with just one minor change.

The list of entities to whom a protected report can be made, found in Section 4 of the bill, at proposed Sec. 146.997(2), is missing the state's protection and advocacy agency. We urge a minor friendly amendment to the bill, which would then conform to the Patient's Bill of Rights statute, where health care employees are currently protected if they report a patient's rights violation to the protection advocacy agency. See Sec. 51.61(5)(d).

As previously described, it is one of our agency's missions and duties to investigate reports of violations of health care patient's rights. Indeed, the legislature already recognizes the importance of our role in that regard. Adding the protection and advocacy agency to the list of those regarding whom reports are protected, would keep Wisconsin statutes consistent, and better protect, not only health care employee rights, but health care patient's rights, as well.

Thank you for your consideration of this important issue. Please feel free to contact me if you have any questions about our position on this bill.

WISCONSIN FEDERATION OF NURSES & HEALTH PROFESSIONALS



9620 West Greenfield Avenue West Allis, WI 53214-2645 414-475-6065 1-800-828-2256 FAX 414-475-5722 AFT, AFL-CIO

TESTIMONY OF STEPHANIE BLOOMINGDALE, STAFF REPRESENTATIVE OF THE WISCONSIN FEDERATION OF NURSES AND HEALTH PROFESSIONALS

JANUARY 25, 2000

Good morning, my name is Stephanie Bloomingdale. I am here on behalf of the Wisconsin Federation of Nurses and Health Professionals organization that represents 3000 health care workers, primarily registered nurses in the state of Wisconsin. I am here today in support of SB 172, a bill that will prevent retaliation against any healthcare workers who, in good faith, raises concerns in the healthcare system. I want to commend Senator George for taking the lead on this important legislation and the other committee members from both parties who have become co-sponsors. You have taken a step in the right direction to protect your constituents and the healthcare consumers in this state. This bill is truly a consumer protection bill.

SB 172 will make it a violation of state law for an employer to retaliate against any healthcare worker who speaks up, either internally or externally, about situations they honestly believe compromise the quality of care a patient is receiving. The legislation also extends this protection to healthcare workers who might testify before a legislative body or report their concerns to a state agency.

Rather than focus on the specifics of the bill, I would like to talk about why we need this legislation. You have only to read the paper almost any day of the week to find an article raising concerns about the quality of our healthcare system. Increasingly, there are reports of lower quality as a result of the pressures to cut costs. Staffing levels at hospitals are often so low that nurses fear errors have been made on an almost daily basis.

Let me be more specific. This spring we conducted a survey of nurses in the southeast region of the state. The results should concern us all. Seventy-five percent of the nurses stated their patient load had increased in the last few years, resulting in a significant decrease in the time spent giving patients direct care. An alarming 86% stated the increased workloads have affected their ability to deliver safe, quality care, primarily due to the fact that they were seeing patients who were much sicker, due to the dramatically shortened time a patient is allowed to remain in the hospital. When leaving work, in addition to feeling frustrated, exhausted and over-extended, over 50% expressed fear that they had made errors at work. The quality problems included: 70% saying there are delays in providing care, 50% saying inexperienced staff are failing to recognize and report significant problems, and 42% saying patients leave the hospital without adequate teaching. One of the most disturbing figures was that over half of the nurses, 56%, said they would not feel confident having someone close to them receive care in the very facility where they work. (By the way, many of the rest said they would only feel comfortable because they would stay with their relative.)

In view of all the serious quality problems mentioned, we asked the nurses if they felt confident that they could raise issues of concern regarding quality and safe staffing levels, with their own employer, without fear of retaliation. We were troubled to learn that over half of the nurses, 55%, said no. Given this figure, it wasn't surprising then when 91% of the nurses stated they believe we need protective whistleblower legislation.

Whether their fears are justified or not, I cannot say. However, what we do know is important is the establishment of a climate where doctors, nurses and all healthcare workers feel they are protected; and, in fact, encouraged to raise quality concerns, both within their institutions and in the appropriate public arenas.

In 1993, a nurse and two other healthcare workers complained to the state nursing home ombudsman about quality concerns they had. They were fired. It took

until 1998 for the state to reinstate them to their jobs, because there was no state agency or clear state law to support them. In 1998, a Racine doctor claimed he was fired for speaking out about the quality problems in his hospital. Last year, Candice Owley, President of the Wisconsin Federation of Nurses and Health Professionals and a registered nurse, was sued for liable by a for-profit Canadian laboratory corporation for raising concerns about the reduction of professional staff in a Milwaukee area lab. As a result of her liable suit, both the *Milwaukee Journal Sentinel* and the *Milwaukee Business Journal* wrote powerful editorials supporting the right and responsibility of healthcare advocates to speak out without fear of retaliation. The *Milwaukee Journal* stated, "it was Candice's obligation as a health professional to speak up if she honestly believed that health care may be compromised by staffing changes wherever they occur."

A defense fund was set up in support of Candice Owley's rights, and among the dozens of contributors was Ed Howe, the CEO of the Aurora healthcare system. In contributing to the defense fund, Mr. Howe stated, "employees must be able to speak their minds: if you cannot say something is wrong that's terrible."

I agree with Mr. Howe, it is terrible; but unfortunately, as we can see by our survey, the majority of nurses still fear retaliation. It is time we put in place protections for these workers. Healthcare consumers will be the winners. Ironically, the Medicare law has included protection for employees who report financial fraud and abuse. There is no such protection in the law for workers who report quality concerns. For the healthcare consumers of our state, and for the healthcare workers struggling everyday to care for you and your families, I come here today to urge you to put in place these critical protections by adopting SB 172 on a unanimous vote. Thank you.





CHARTERED 1958

6333 W. BLUE MOUND RD., MILWAUKEE, WISCONSIN 53213 PHONE (414) 771-0700 FAX (414) 771-1715

David Newby, President • Sara J. Rogers, Exec. Vice President • Phillip L. Neuenfeldt, Secretary-Treasurer

TO:

R - 14

Members of the Senate Judiciary and Consumer Affairs Committee

FROM:

Phil Neuenfeldt, Secretary-Treasurer

DATE:

January 25, 2000

RE:

SUPPORT FOR SENATE BILL 172

"Whistleblower" Protection for Health Care Workers

Whistleblower protection has become especially important in the health care field. The radical shift to competitive managed care has resulted in grave concerns about the quality of that care. The "bottom line" mentality of providers that strive to control costs to remain competitive can be at odds with the health care treatment that patients need and deserve. This is even more true at for-profit health care facilities. With growing complaints about the quality of our health care system, health care workers find themselves on the front lines in trying to protect the patients they serve.

It is in the interests of a healthy society that anyone who "blows the whistle" on illegal, unfair or unsafe conditions or practices does have legal protection. However, this is especially important for workers who fear retaliation from their employers. This fear is justified. In a study of workers from all occupational categories who had decided to "blow the whistle" on certain practices or conditions, two-thirds experienced the following forms of retaliation from their employer: 69% lost their jobs or were forced to retire; 64% received negative job evaluations; 68% had work more closely monitored by supervisors; and 64% were blacklisted from getting another job in their field.*

The passage of SB 172 will be of major benefit to health care consumers. The very existence of such protection for health care workers will provide a positive incentive for health care providers to deliver quality care. We urge your support.

PN/JR/mj

* Whistleblower Disclosures and Management Retaliation, Work and Occupations, Vol. 26, No. 1, February 1999, pgs 107-128.



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Testimony in Support of SB 172 Whistleblower Protection for Health Care Workers by

Dr. Robert Kraig, Political Director, SEIU-Wisconsin State Council

Senate Judiciary and Consumer Affairs Committee, January 25, 2000

SEIU is the second largest union in the AFL-CIO, and the largest health care union in Wisconsin and the nation. On behalf of the roughly 12,000 SEIU members in Wisconsin, I want to commend Chairman George, and all the other sponsors of the bill in both houses, for taking the initiative on this important issue.

Creating an environment in which potential whisteblowers in the health care industry feel free to come forward is essential to improving the quality of care. Studies by SEIU and other organizations demonstrate that staffing levels are dangerously low, medication errors and infection control lapses rising, and that there is an overall decline in the quality of patient care. This situation has already reached critical levels in the nursing home industry, and is growing worse in hospitals. A recent study by Peter D. Hart Research Associates, commissioned by SEIU, found that 45% of health care professionals believe the quality of care is getting worse. This was confirmed by a study released in November by the Institute of Medicine, a division of the National Academy of Sciences, which concluded that medical mistakes kill from 44,000-98,000 hospitalized Americans every year. Even the lower number is greater than the number who die each year from highway accidents, breast cancer, and AIDS (Milwaukee-Journal Sentinel, November 30, 1999).

In this time of unprecedented restructuring in the health care industry, the need for patient advocates who feel free to speak out against improper, dangerous, or illegal care has never been more urgent. Indeed, one of the

Local 150 (Statewide)

Local 21, School District of La Crosse

Local 180, La Crosse City Employees Union Local 152, Racine Unified School District Local 168, Kenosha Unified School District Local 1199WI, United Professionals (Statewide)

-2000

key recommendations in the Institute of Medicine study on medical errors was for all major errors to be reliability reported to state agencies. Health care workers are clearly the most reliable source of information on medical errors.

Despite this, health care workers are routinely retaliated against for reporting patient care and fraud abuses. This undermines the vital patient advocacy role of health care professionals. In a study at one major hospital, only 13% of health care workers felt they could honestly answer JACAHO inspectors questions about the quality of care without risking reprisals. At our union meetings, we often hear these same concerns. Our members worry that they do not have a voice on the job, they worry that they don't have the staffing and resources to get the job done right, and they worry that if they speak out about the problems they see that they will be fired.

In our judgement, SB 172 is a solid bill and we strongly support it. At the hearings on the Assembly companion bill, AB 379, I pointed out some of the areas in which the bill could be made stronger. Because we would support an even more robust version of this bill, SEIU adamantly opposes any weakening of the current version.

We understand that there have been proposals to substitute a state-wide 800 number for the anti-discrimination protections in the bill, and to create a gag rule that would prevent health care workers from going public with abuses. Both of the proposals are nullifications of the central principles underlying whistleblower protections: that the best means of deterring medical malfeasance is disclosure, and that it is thus contrary to the public interest to allow health care providers to discriminate against employees who report serious abuses.

In its present form, this bill is an important step towards insuring that front-line health care providers will be free to fulfill their professional duty to advocate on behalf of their patients. It also makes it more likely that they will have a stronger voice in the on-going restructuring of the health care system.

Chair

William D. Petasnick

Milwaukee

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Marshfield

Immediate Past Chair George L. Johnson

Reedsburg

President and CEO Robert C. Taylor



Wisconsin Health & Hospital Association, Inc.

5721 Odana Road Madison, WI 53719-1289

608/274-1820

FAX: 608/274-8554

January 25, 2000

TO:

Members, Senate Judiciary Committee

FROM:

Scott Peterson, WHA Director of State Issues

SUBJECT:

SB 172 Health Care Employer Regulation

The health organizations that make up the membership of the Wisconsin Health and Hospital Association are committed to providing the best patient care to all that enter our facilities. It is in the interests of our members to find sub-par performers and remove them from their responsibilities of patient care. To this end "whistleblower" mechanisms already exist as part of a total quality management approach. However, even though we philosophically agree with the need for "whistleblower" functions we are opposed to SB 172 for the following reasons:

- The underlying assumption of the proposal is that health care providers are "bad actors" and that state protection is needed for hospital and health care professionals. However, there is no evidence that this legislation is needed. No studies or valid documentation exist which indicate that health care providers and plans are in any way discriminating or retaliating against employees or contractors who complain about conditions in a health care facility or concerns about patient safety.
- The proposal falsely assumes that hospital and health plan patient safeguards are inadequate in addressing any concerns that health care workers may have. Hospitals and health systems have many safeguards in place, such as Quality Assurance Teams and Continuous Quality Improvement Teams, to ensure that patients receive quality care. Quality assurance mechanisms, independent accreditation procedures and other safe guards provide an opportunity for health care workers to voice concern over quality of patient care. The Joint Commission on Accreditation of Healthcare Organizations, which accredits health care providers for participation in the Medicare program, includes a number of safeguards that address patient safety:
 - 1. Hospitals must have a mechanism in place for handling concerns relating to patient care and/or safety that are raised by employees, patients, or patients' families.
 - 2. Since January 1998, the certification process allows employees to anonymously voice concerns or complaints regarding patient care or hospital administration directly to the JCAHO.

- The JCAHO instructs hospitals that they must alleviate any potential concern about reprisals to individuals who participate in the interview process.
- 3. The certification process requires a widely sweeping quality assurance program to be in place in a hospital seeking accreditation to help hospitals take note of issues brought to them by employees. The hospital must continually assess services provided to patients and must include input from employees.
- 4. JCAHO certification requires health care providers to ensure adequate staffing levels to properly care for patients.
- The proposal erroneously assumes that unsafe practices and retaliation against personnel are commonplace. There is no evidence that this is the case. Hospitals are committed to patient safety and assuring that each patient receives the highest quality of care, using the most appropriate staff members. According to the most comprehensive study done by the Institute of Medicine, little empirical evidence is available to support the anecdotal and other informal information that hospital restructuring and changes in the staffing patterns of nursing personnel are adversely affecting hospital quality of care.
- The proposal contains no protections for a health care provider falsely accused of violating its provisions.
- The proposal could compromise patient confidentiality by protecting employees who disclose intimate details relating to patient care.
- The proposal could allow health care workers to delay or block legitimate actions that health care entities need to take to respond to market and other forces. The proposal could restrain a health care provider from restructuring or implementing other organizational changes if the employee alleges that the action is taken in retaliation.
- The proposal would establish a precedent by inappropriately singling out the health care industry.



Wisconsin Nurses Association

6117 Monona Drive Madison, Wisconsin 53716-3995 (608) 221-0383 FAX (608) 221-2788

TO:

Senator Gary George, Chair and Members of the Senate Judiciary and Consumer

Affairs Committee

FROM:

Gina Dennik-Champion, RN

WNA Executive Director

DATE:

January 25, 2000

RE:

Support for SB172 - Health Care Facility Whistleblower Protection

Good morning Senator George and members of the Senate Judiciary and Consumer Affairs Committee. My name is Gina Dennik-Champion and I am a Registered Nurse and Executive Director of the Wisconsin Nurses Association (WNA). WNA is the voice for professional nurses in Wisconsin. Thank you for allowing me the opportunity to present information on why we support SB - 172 - Health Care Facility Whistleblower Protection.

WNA has worked with Senator George in drafting SB 172. We believe that this bill is necessary as a response to the current challenges facing our health care institutions today. WNA realizes that there are many pressures coupled with multiple priorities and demands confronting health care administrators and managers today. Many changes have occurred in response to these demands. Nurses have seen, experienced and participated in implementing many of the changes within the health care delivery system. It is WNA's experience that some of these changes have resulted in less than satisfactory conditions for patients and health care workers. Nurses report these potential or actual unsafe conditions by following the established institutional reporting policies and procedures. The employers response to these concerns is one of either addressing the concern or ignoring it. When the concern expressed by the nurse is not addressed by those with the authority to remedy the situation the nurse must evaluate on what actions to take next. The nurse must decide to either let the concern drop or pursue the issue further by going and reporting the concern to an authority outside the facility.

WNA has found that nurses have concerns about taking either action. If the nurse lets the concern drop a negative outcome to the patient and/or the health care worker may result. If the nurse decides to pursue the issue by reporting the safety concern to an authorized person outside of the facility then there is the perception by the nurse, either real or imagined, that retaliation by the employer will result.

Part of my role as the Executive Director of the WNA is to manage and serve as the workplace security consultant. WNA does not offer collective bargaining services but does offer one-on-one support and advice to nurses in addressing and resolving workplace problems. Many of the calls

Email: wna@execpc.com

Website: www.execpc.com/~wna/

that I receive from Registered Nurses is in regards to this issue. Some nurses state very clearly to me that if they report patient safety concerns outside of their organization they will be fired. This puts the nurse in a very tenuous position because nurses are ethically obligated to report conditions that may affect the safety of the patient. This bill, SB 172, will allow the nurse and other health care workers to report in "good faith" safety situations that the employer will not address without the fear of employer retaliation or discrimination.

WNA does not want this bill to allow protection for an employee who has a less than satisfactory work performance to use whistleblowing as a means of maintaining employment. This clearly is not "good faith" reporting.

WNA views the Registered Nurse as the key indicator of quality care in health care environments. Lack of quality needs to be reported using the proper channels so that improvements can result. Nurses need the ability to report these concerns to an authority outside the institution, after he/she has followed the appropriate institutional policies and procedures, without fear of retaliation.

The protection of the patient is at the heart of this bill. Patient protection is important as we go about the ever important business of providing quality and safe health care in a caring environment.

Thank you for providing me the opportunity to present this information. I want to personally thank Senator George for being the lead author on SB 172 and to the other members of this committee for their support.

It is my hope that everyone will see the value in this legislation.

I will gladly answer any questions you may have.

Thank you.